APPLICATION NUMBER: _09/435034_

Total Fee Calculation

	Fee Code Sm./Lg.	Total # Claims	Number Extra	X	Fee Sm. Entity	Fee Lg. Entity	= Total
Basic Filing Fee	201/101				___	✓	760
Total Claims >20	203/103	35 -20 =	15	x	___	___	270
Independent Claims >3	202/102	16 -3 =	13	x	___	___	1014
Mult. Dep Claim Present	204/104				___	___	260
Surcharge	205/105				___	___	___
English Translation	139				___	___	___

TOTAL FEE CALCULATION

2304

Fees due upon filing the application:

Total Filing Fees Due = $ _____2304_____ $ 40.00
                                                        → Assig. paid
                                                           also
Less Filing Fees Submitted - $ _____2326_____ +

BALANCE DUE   = $ _____ $18.00_____   for Claim
                                              unpaid

Office of Initial Patent Examination

FORM OIPE-RAM-01 (Rev. 12/97)

	Application or Docket Number
PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998	

CLAIMS AS FILED - PART I

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	35 minus 20=	* 15
INDEPENDENT CLAIMS	16 minus 3 =	* 13
MULTIPLE DEPENDENT CLAIM PRESENT		

SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
	380.00	OR		760.00
X$ 9=		OR	X$18=	270
X39=		OR	X78=	1014
+130=		OR	+260=	260
TOTAL		OR	TOTAL	2304

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X$ 9=		OR	X$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X$ 9=		OR	X$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X$ 9=		OR	X$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.